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24498 7590 11/16/2010

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THOMSON Licensing LLC
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Joel Fogelson (Depositor's name)
Joel Fogelson (Signature)
February 16, 2011 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/475,448	12/30/1999	David Johnston LYNCH	RCA-89-385	6337

TITLE OF INVENTION: RATINGS CONTROL SYSTEM WITH TEMPORARY OVERRIDE CAPABILITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	02/16/2011

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHANG, ANNAN Q	2424	725-025000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. Robert D. Shedd 2. Harvey D. Fried 3. Joel M. Fogelson
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE or COUNTRY)

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Boulogne Cedex, France

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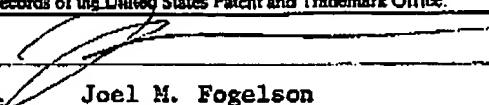
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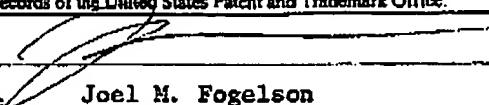
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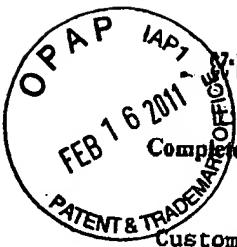
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Registration No. 43,613

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1 Robert D. Shedd
 2 Harvey D. Fried
 3 Joel M. Fogelson

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Authorized Signature

Date February 16, 2011

Typed or printed name

Joel M. Fogelson

Registration No. 43,613

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